

To:

County

Departments of
Community
Programs,
Human
Services, Social
Services

HealthCheck
Providers

Nurse Midwives

Nurse
Practitioners

Physician
Assistants

Physicians

HMOs and Other
Managed Care
Programs

Blood Lead Testing Requirements

The Centers for Medicare and Medicaid Services, through Early and Periodic Screening, Diagnosis, and Treatment guidelines, requires that all children who are enrolled in Wisconsin Medicaid receive a blood lead test at about 12 months and again at about 24 months. In addition, children between the ages of three and five must receive a blood lead test if they have never been tested before. This requires the testing of all children enrolled in Wisconsin Medicaid regardless of the presence or absence of recognized lead exposure risks.

Medicaid Requirements for Blood Lead Testing

According to the Centers for Medicare and Medicaid Services, all Medicaid children are considered at high risk for lead poisoning. Therefore, all children who are enrolled in Wisconsin Medicaid must receive a blood lead test at about the following ages:

- 12 months *and* 24 months.
- Three to five years, if not previously tested.

Providers are responsible for assuring that children receive blood lead tests at the required ages. Testing of all children enrolled in Wisconsin Medicaid applies regardless of the presence or absence of recognized lead exposure risks. According to the American Academy of Pediatrics, a low blood lead concentration in a one-year-old does not preclude elevation later. Therefore, providers are required to repeat blood lead testing at

about two years of age, regardless of the results of the one-year test.

A capillary fingerstick can be done for a blood lead screening test. A confirmatory venous blood test is required only if the capillary blood lead level is 10 mcg/dL or greater.

Wisconsin's Blood Lead Testing Results

In 2006, 2,117 children in Wisconsin were found to be lead poisoned. From 1997 through 2006, 34,730 children in Wisconsin were found to be lead poisoned¹ and 78 percent of these children were enrolled in Wisconsin Medicaid. Unfortunately, only about one third of all Medicaid children entering school have received the required testing for lead poisoning.

Refer to the Attachment of this *Wisconsin Medicaid and BadgerCare Update* for locations of Wisconsin Lead Poisoned Children from 1997 through 2006.

Medicaid Blood Lead Testing Summary Report

Providers who annually see 25 or more Medicaid-eligible children that fall within the required testing age range recently received a Medicaid Blood Lead Testing Report from the Department of Health and Family Services through the Division of Health Care Financing and the Division of Public Health. The report allows the provider to evaluate his or her

compliance with Medicaid lead testing requirements.

Providers who did not receive a report and are interested in receiving one may contact the Wisconsin Childhood Lead Poisoning Prevention Program at (608) 266-5817.

Blood Testing at WIC Clinics

Approximately 75 percent of all children seen in Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) clinics in Wisconsin are Wisconsin Medicaid recipients. The WIC clinics do some blood lead testing of Medicaid-enrolled children when performing routine blood tests for hemoglobin or hematocrit. Confusion often exists when a fingerstick is performed at the WIC clinic for hemoglobin or hematocrit as parents may assume that their child was also tested for lead. To validate that a blood lead test was performed on a particular child and to obtain the result of the test, providers may contact the Wisconsin Childhood Lead Poisoning Prevention Program at (608) 266-5817 or the Milwaukee Childhood Lead Poisoning Prevention Program at (414) 286-5987.

Office-Based Blood Lead Testing

Wisconsin Medicaid encourages providers to draw capillary (fingerstick) blood lead samples within their office or clinic. Performing the fingerstick in the clinic ensures the test is completed. If the child is referred to an outside area, the test may not be done.

Providers wanting to provide blood lead testing in their office should refer to provider handbooks for information on the Clinical Laboratory Improvement Amendment. The Clinical Laboratory Improvement Amendment requires laboratories and providers performing tests for health assessment or for the diagnosis,

prevention, or treatment of disease or health impairment to comply with specific federal quality standards.

Online Resources for Information on the Treatment and Prevention of Lead Poisoning

The following information regarding lead poisoning is available online.

- The American Academy of Pediatrics delivered a policy statement in 2005 that reiterates the Medicaid blood lead testing mandate because most children with lead poisoning are Medicaid recipients and most have not been tested (*pediatrics.aapublications.org/cgi/content/full/116/4/1036#SEC6*).
- The Centers for Disease Control and Prevention's (CDC) August 2005 statement titled "Preventing Lead Poisoning in Young Children," includes a review of scientific evidence for adverse effects in children at blood lead levels below 10 mcg/dL (*www.cdc.gov/nceh/lead/publications/PrevLeadPoisoning.pdf*).
- Information on medical assessment and interventions for lead poisoning, including chelation treatment protocols include the following:
 - ✓ The CDC's March 2002 report titled "Managing Elevated Blood Lead Levels in Young Children: Recommendations from the Advisory Committee on Childhood Lead Poisoning Prevention" (*www.cdc.gov/nceh/lead/CaseManagement/caseManage_main.htm*).
 - ✓ "Protocols for Clinical Management of Lead Poisoned Children," Margaret Layde, M.D., Medical College of Wisconsin (*dhfs.wisconsin.gov/lead/doc/laydeprotocol.pdf*).

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- Lead poisoning risk factors in Wisconsin, such as Medicaid versus non-Medicaid status, racial and ethnic disparities, age of child, and age of housing (dhfs.wisconsin.gov/lead/lpsurveillance/index.HTM).
- Early and Periodic Screening, Diagnosis, and Treatment program requirements, including the blood lead testing requirement (www.cms.hhs.gov/MedicaidEarlyPeriodicScrnl02_Benefits.asp#TopOfPage).
- Information that can be provided to families include the following:
 - ✓ The brochure titled, “Look Out for Lead” (dhfs.wi.gov/lead/doc/ParentsLeadEng.pdf).
 - ✓ “Lead Paint Safety: A Field Guide for Painting, Home Maintenance and Renovation Work” (www.hud.gov/offices/lead/training/LBPguide.pdf).
 - ✓ A list of consumer products that contain dangerous levels of lead (dhfs.wi.gov/lead/LSources_Products.HTM).

For more information on educational materials for preventing lead poisoning, providers may contact the Wisconsin Childhood Lead Poisoning Prevention Program at (608) 266-5817.

Requirements Apply to All Medicaid Children

The requirements discussed in this *Update* apply to all Medicaid children, regardless of whether they are in fee-for-service or an HMO.

¹Defined as a blood lead level equal to or greater than 10 mcg/dL, which the Centers for Disease Control and Prevention (CDC) considers a blood lead level of concern.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

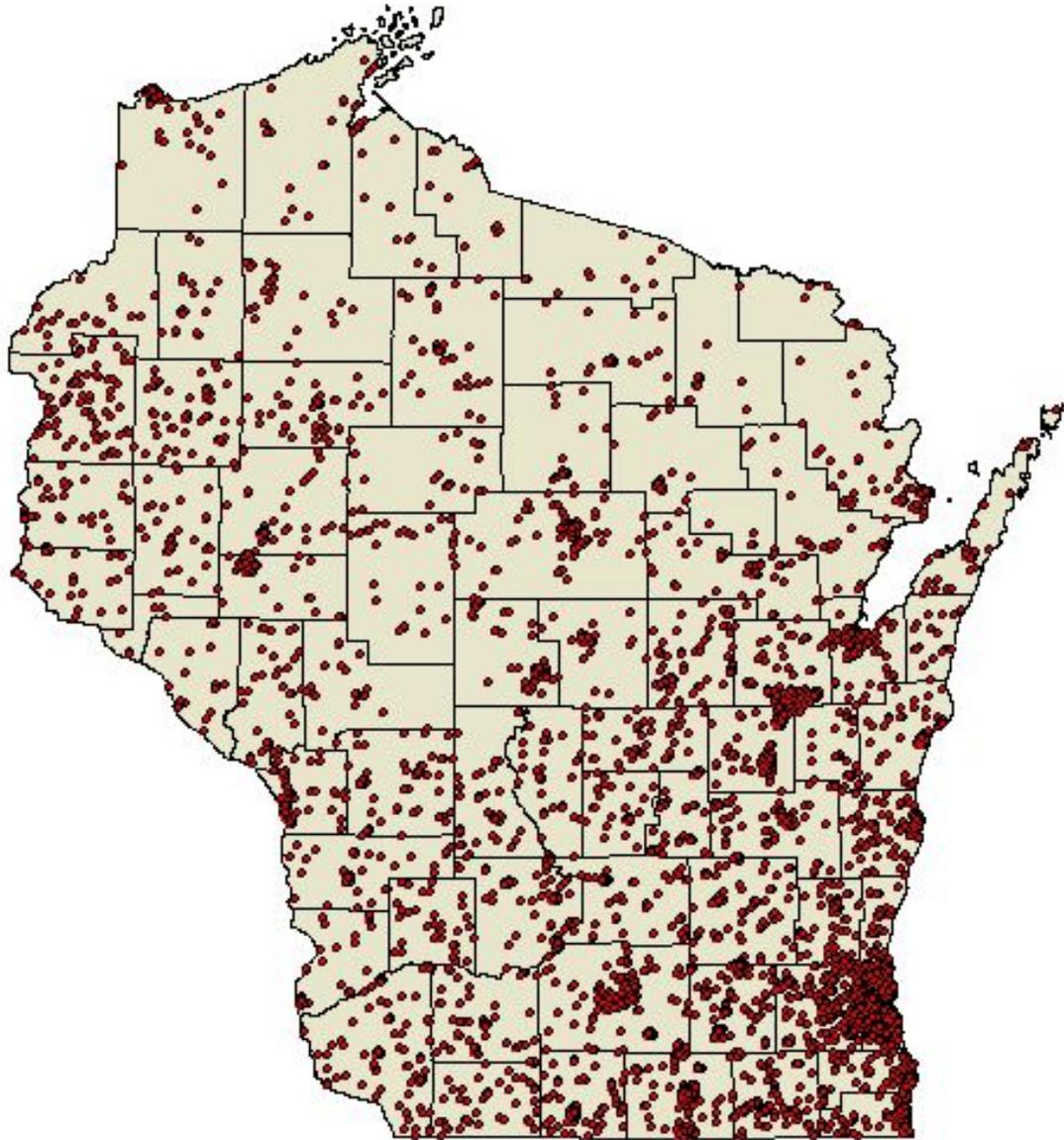
Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

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ATTACHMENT

Locations of Wisconsin Lead Poisoned Children* 1997 Through 2006



* According to statistics provided by the Division of Public Health, a total of 34,730 Wisconsin children less than six years old were found to be lead poisoned during that time period.